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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/919,768	
	Filing Date	July 31, 2001
	First Named Inventor	Jeffrey Grainger
	Art Unit	2161
Examiner Name	Unassigned	
Total Number of Pages in This Submission	Attorney Docket Number	021737-000530US

## ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): USPTO form SB08B (one page), copy of one cited reference, return postcard.
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## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Townsend and Townsend and Crew LLP Chad R. Walsh	Reg. No. 43,235
Signature	<i>Chad R. Walsh</i>	
Date	3/31/03	

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

JEFFRY J. GRAINGER ET AL.

Application No.: 09/919,768

Filed: July 31, 2001

For: COMPUTER IMPLEMENTED  
METHOD OF MANAGING  
INFORMATION DISCLOSURE  
STATEMENTS

Examiner:

Art Unit: 2161

SUPPLEMENTAL INFORMATION  
DISCLOSURE STATEMENT UNDER 37  
CFR §1.97 and §1.98

Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir:

The reference cited on attached form PTO/SB/08B is being called to the attention of the Examiner. A copy of the reference is enclosed.

It is respectfully requested that the cited reference be expressly considered during the prosecution of this application, and the reference be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR §1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

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Respectfully submitted,



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PA 3290940 v1



PTO/SB/08B (10-01)

Approved for use through 10/31/2002. OMB 0651-0031

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**INFORMATION DISCLOSURE  
STATEMENT BY APPLICANT**

(use as many sheets as necessary)

Sheet 1 of 1

**Complete if Known**

Application Number	09/919,768
Filing Date	July 31, 2001
First Named Inventor	Jeffrey Grainger
Art Unit	2161
Examiner Name	Unassigned
Attorney Docket Number	021737-000530US

**OTHER PRIOR ART -- NON PATENT LITERATURE DOCUMENTS**

Examiner Initials *	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
	1	SCHWEGMAN et al. <u>Using the Internet to Support Your Practice in Minnesota</u> , Lorman Education Services, pp. 3-161 (2000).	

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Examiner Signature		Date Considered	
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<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

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